

Carroll County Government

Department of Human Resources

225 North Center Street, Suite 100

Westminster, MD 21157 (410) 386-2129 Phone

(410) 386-2020 Job Hotline www.carrollcountymd.gov



The County Commissioners of Carroll County recognize the rights of all people, including County employees, to equal opportunity. Discrimination against County employees on the basis of race, color, religion, age, gender, national origin, sexual orientation, marital status, physical or mental disability is strictly prohibited. The Americans with Disabilities Act, Titles I and II, applies to County government employment. If you have questions, suggestions, or complaints, please contact Kimberly L. Frock, Director of Carroll County Government Americans with Disabilities Coordinator for Employment, at the Department of Human Resources (410-386-2129) or MD Relay service 7-1-1/800-735-2258. The mailing address is 225 North Center Street, Westminster, Maryland 21157.

Carroll County is an Equal Opportunity Employer

EMPLOYMENT APPLICATION

Social Security No. _____ Date _____

Position Applied for: _____

Name _____
Last First Middle

Present Address _____
Street City State Zip

Home/Cell Phone No. _____ Email Address _____

Vehicle Operators License No. _____ State _____ Class _____ Expires _____

Is this a *CDL* license? _____ Yes _____ No

Has your license ever been suspended or revoked in any State? _____ Yes _____ No

If yes, indicate which state, date and reason: _____

Have you ever been convicted of a crime (excluding minor traffic violations)? Conviction of a crime will not necessarily bar employment.

Yes _____ Date of conviction (year) _____ No _____ Do not report any conviction for which the records have been officially expunged.

If yes, please explain. _____

Have you previously worked for Carroll County Commissioners? _____ Yes _____ No. If yes, when _____

Do you have any relatives including in-laws, members of your immediate family, and members of your extended family currently working for the County Commissioners? _____ Yes _____ No

If yes, _____
Name Department/Bureau/Agency Relationship

How soon can you report to work? _____ Acceptable salary range: _____

Educational Data

Schools Attended Did you successfully complete?	Name and location of last school attended	List major courses taken
Elementary Yes <input type="checkbox"/> No <input type="checkbox"/>		
Junior High Yes <input type="checkbox"/> No <input type="checkbox"/>		
Senior High Yes <input type="checkbox"/> No <input type="checkbox"/>		
If you did not graduate from high school, have you received a GED? Yes <input type="checkbox"/> No <input type="checkbox"/>		
COLLEGE, UNIVERSITY or OTHER TRAINING Give name and location of College, University or Professional School	Major or Specialty	Degree or Certificate received? If yes, give title. If No, number semester hours or credits completed.

Professional Registration

State _____ Date _____ Number _____

Give employment record as completely as possible **starting with your present or last position** not to exceed past 15 years. Attach additional sheets if necessary. **Note: This application must be fully completed whether or not a resume is submitted.**

1. Employer/Firm	Address		
	Telephone	Date Start	Date Finish
Type of Business	Reason for Leaving	Full-Time	Part-Time

Title of Position and Duties:

Immediate Supervisor:

Title:

2. Employer/Firm	Address		
	Telephone	Date Start	Date Finish
Type of Business	Reason for Leaving	Full-Time	Part-Time

Title of Position and Duties:

Immediate Supervisor:

Title:

3. Employer/Firm	Address		
	Telephone	Date Start	Date Finish
Type of Business	Reason for Leaving	Full-Time	Part-Time

Title of Position and Duties:

Immediate Supervisor:

Title:

Special equipment operated _____

Business or Professional References Only – (Please do not list relatives)

	Name	Address	Telephone #	Occupation	Years Known
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

Make sure you answer all the questions on this form. If you do not fill it out completely, it may result in the rejection of this application.

“UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.00.”

I have read and acknowledge the above statement regarding Maryland State Code and lie detector tests.

Signature

Date

I authorize Carroll County to investigate any and all statements made in this application. I also authorize my current or previous employers to verify the statements made in this application and to provide other employment data relating to my job performance, as requested. I authorize Carroll County to contact my references.

Falsification or misrepresentation of the information submitted on this application could result in the disqualification of the applicant from further consideration for employment, or if the applicant has been hired, could result in his/her discharge from employment.

Date _____ **Signature** _____

May we contact your present employer? _____

EQUAL EMPLOYMENT OPPORTUNITY

APPLICATION INFORMATION

The information requested below is needed to meet the requirements of certain federal regulatory agencies. It will be seen and tabulated by the Department of Human Resources. This section is separated from your application when received by the Department of Human Resources. This information is confidential and will **not** be used in any employment decision or in determining a test score. It will not be maintained in your personnel file if you become an employee.

Please complete all items and return this form with your application.

Name: _____ Date: _____

Position Applied For: _____
(Give Exact Title)

Sex: M _____ F _____

Date of Birth: _____
Month Day Year

Race/Ethnic Identification:

- _____ White
- _____ Black or African American
- _____ Hispanic or Latino
- _____ Asian
- _____ Native Hawaiian or Other Pacific Islander
- _____ American Indian or Alaska Native
- _____ Two or more races

How did you learn about this job opportunity?

- Newspaper (Give Name of Newspaper): _____
- College Placement Office County Bulletin Board Carroll County Employee
- Job Hotline Internet BERC/Agency Referral
- Job Fair Other Publications _____

Carroll County is an Equal Opportunity Employer

The County Commissioners of Carroll County recognize the rights of all people, including County employees, to equal opportunity. Discrimination against County employees on the basis of race, color, religion, age, gender, national origin, sexual orientation, marital status, physical or mental disability is strictly prohibited. The Americans with Disabilities Act, Titles I and II, applies to County government employment. If you have questions, suggestions, or complaints, please contact Kimberly L. Frock, Director of Carroll County Government Americans with Disabilities Coordinator for Employment, at the Department of Human Resources (410-386-2129) or MD Relay service 7-1-1/800-735-2258. The mailing address is 225 North Center Street, Westminster, Maryland 21157.